



# Iowa Department of Human Services

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## INFORMATIONAL LETTER NO.1781-MC-FFS

**DATE:** March 21, 2017

**TO:** Iowa Medicaid Hospitals (excluding Critical Access Hospitals),  
Physicians, Physical Therapists, Independent Speech Pathologists,  
Occupational Therapists and Rehabilitation Agency Providers

**APPLIES TO:** Managed Care, Fee-for-Service

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Multiple Procedure Payment Reductions (MPPR) for Therapy Claims

**EFFECTIVE:** January 1, 2017

Informational Letter [1752-MC-FFS](#)<sup>1</sup> issued on December 19, 2016, referenced procedure codes that are subject to MPPR for therapy claims. There are eight procedure codes (shown in **bold font** below) that were inadvertently omitted in Informational Letter 1752 in relation to MPPR for therapy claims. By virtue of these additional codes being added they would be subject to MPPR reductions.

### List of Therapy Procedures Subject to the Multiple Procedure Payment Reduction:

Code	Short Descriptor
92507	Speech/hearing therapy
92508	Speech/hearing therapy, group
<b>92521</b>	<b>Evaluation of speech fluency</b>
<b>92522</b>	<b>Evaluation of speech sound production</b>
<b>92523</b>	<b>Evaluation of speech sound production with eval of language</b>
<b>92524</b>	<b>Behavioral and qualitative analysis of voice and resonance</b>
92526	Oral function therapy
92597	Oral speech device evaluation
92607	Evaluation for prescription of speech device, 1 hour
92609	Use of speech device service
96125	Cognitive performance testing

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All Informational Letters are sent to the Managed Care Organizations  
Iowa Medicaid Enterprise – 100 Army Post Road - Des Moines, IA 50315

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<sup>1</sup> [https://dhs.iowa.gov/sites/default/files/1752-MC-FFS\\_MultipleProcedurePaymentReductionsforTherapyClaims.pdf](https://dhs.iowa.gov/sites/default/files/1752-MC-FFS_MultipleProcedurePaymentReductionsforTherapyClaims.pdf)

97012	Mechanical traction therapy
97016	Vasopneumatic device therapy
97018	Paraffin bath therapy
97022	Whirlpool therapy
97024	Diathermy (e.g., microwave)
97026	Infrared therapy
97028	Ultraviolet therapy
97032	Electrical stimulation
97033	Electric current therapy
97034	Contrast bath therapy
97035	Ultrasound therapy
97036	Hydrotherapy (Hubbard tank)
97110	Therapeutic exercises
97112	Neuromuscular reeducation
97113	Aquatic therapy/exercises
97116	Gait training therapy
97124	Massage therapy
97140	Manual therapy
97150	Group therapeutic procedures
97161	PT eval low complex 20 minutes
97162	PT eval mod complex 30 minutes
97163	PT eval high Complex 45 minutes
97164	PT re-eval est plan care
97165	OT eval low complex 30 minutes
97166	OT eval mod complex 45 minutes
97167	OT eval high complex 60 minutes
97168	Ot re-eval est plan care
97530	Therapeutic activities
97533	Sensory integration
97535	Self care management training
97537	Community/work reintegration
97542	Wheelchair management training
<b>97750</b>	<b>Physical performance test or measurement with report</b>
<b>97755</b>	<b>Assistive technology assessment; direct contact, written</b>
97760	Orthotic mgmt and training
97761	Prosthetic training
97762	C/o for orthotic/prosth use
<b>G0281</b>	<b>Electrical Stimulation</b>
G0283	Elec stim other than wound
<b>G0329</b>	<b>Electromagnetic therapy</b>

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909, or by email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).